

**Delay in identifying fetal distress during delivery  
(03HDC16282, 15 December 2004)**

*Independent midwife ~ Obstetrician ~ Fetal monitoring ~ Fetal distress  
~ Record-keeping ~ Rights 4(1), 4(2)*

A 24-year-old woman complained about the care provided to her by a midwife and an obstetrician during her labour and delivery at a public hospital.

The woman had previously had two miscarriages, but this pregnancy had appeared to progress well. The woman began labour mid-morning and arrived at the hospital at 1.05pm. The labour progressed well, and the midwife noted that the baby's condition was good. In the early evening the independent midwife ruptured the woman's membranes and noted "thick, mucousy cream coloured liquor". She continued to monitor the fetal heart rate closely after noticing a deceleration to 70bpm initially at 7.50pm. At 8.30pm there was a prolonged deceleration to 60bpm and the obstetric consultant was contacted.

After examining the mother and noting meconium-stained liquor suggestive of fetal distress, the obstetrician decided to proceed to Caesarian section. At 9.29pm an asphyxiated baby girl was delivered with liquor thickly stained with meconium and the umbilical cord wrapped around the neck twice. Attempts at resuscitation were unsuccessful.

It was held that the midwife breached Rights 4(1) and 4(2) in not monitoring the labour rigorously enough and not recording the fetal heart rate frequently enough. The expert midwife advisor noted that the midwife's recording was "too infrequent, poorly described and unrelated to the contraction". The Commissioner highlighted that "professional care requires, as a minimum, appropriately written records, and taking and recording observations is critical to providing a reasonable standard of care".

In addition, the poor quality of the CTG tracing and the presence of unusual liquor should have alerted the midwife to contact the obstetrician earlier. The midwife advisor noted that the actions taken by the midwife after 7.50pm "lacked those critical assessment skills necessary to judge when a labour ceases to be completely normal".

The obstetrician was found to have acted appropriately in delivering the baby by Caesarean section.